



SFUND RECORDS CENTER
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SFUND RECORDS CTR
2166-07593

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION IX

215 Fremont Street
San Francisco, Ca. 94105

FILE COPY

CERTIFIED MAIL NO. P918447901
RETURN RECEIPT REQUESTED

05 OCT 1989

In Reply
Refer to: Mail Code H-6-1

Fred Lantz
Water Systems Manager
City of Burbank
Public Services Department
164 West Magnolia Blvd.
P.O. Box 631
Burbank, CA 91503

Dear Mr. Lantz:

As you know, the United States Environmental Protection Agency (EPA) and the Los Angeles Department of Water and Power (LA DWP) are conducting an investigation of ground-water contamination in the San Fernando Valley to determine the nature, cause and extent of contamination in the ground-water basin. The investigation will also assess the effects of the contamination on the environment and public health.

Part of this investigation will include identifying sources of contamination within the ground-water basin. It has recently come to EPA's attention that the Burbank Public Services Department may be in possession of needed information.

Under the provisions of Section 104 of the Comprehensive Environmental Response, Compensation, and Liability Act of 1980 (CERCLA), 42 U.S.C. 9604, and Section 3007 of the Resource Conservation and Recovery Act, as amended by the Solid Waste Disposal Act Amendments of 1980 (RCRA), 42 U.S.C. 6927, the Administrator of the Environmental Protection Agency has the authority to require any person who generates or has generated or otherwise handled hazardous wastes and/or hazardous substances to furnish information regarding its operations. The words "hazardous substances," "hazardous waste," and "person" are defined in 42 U.S.C. Section 9601 (14) of CERCLA, and the questions below. Pursuant to these statutory provisions, you are hereby requested to provide the following information for your facility located at 164 West Magnolia Boulevard, Burbank, California, and any other relevant location in the San Fernando Valley:

1. A description of the purpose and operations of your facility including a detailed description of any hazardous waste storage, treatment, or disposal operations. Include the dates of operation.
2. A detailed description of all hazardous substances and hazardous wastes that were or are used or produced in operation or in production-related processes at your facility(s). Of particular importance is your information regarding past and present chlorinated solvent usage including but not limited to carbon tetrachloride (CTC), trichloroethylene (TCE), and tetrachloroethylene (PCE). For each substance and each waste used or generated, provide the following information.
 - a. The common chemical name, specific chemical name, and chemical composition by volume for liquids and weight for solids;
 - b. The total amount, in gallons for liquids and tons for solids, of annual usage or generation;
 - c. The methods and processes used to generate, store, treat, and dispose of, and otherwise handle each substance;
 - d. When and where the above processes occurred and are occurring. Please specify dates and locations as precisely as possible. Location information should include, but not limited to, information pertaining to tanks, ponds, treatment facilities, and other units which were historically used to treat, store and/or dispose of hazardous substances but which may no longer exist.
3. Any photographs, maps, diagrams regardless of their date, which show areas where hazardous substances or hazardous wastes have been or may be located.
4. A description of past and present disposal practices of hazardous substances and hazardous wastes generated or used at your facility. If off-site disposal of wastes has occurred, please provide a detailed description, including copies of manifests of hazardous substances and hazardous wastes, the names and addresses of transporters that have ever been engaged for the purpose of transporting hazardous substances or hazardous wastes from your facility, and the location to where the waste was hauled.
5. Locations and detailed descriptions of all monitoring wells, supply wells, injection wells, and underground tanks at your facility.

6. Is your facility(s) currently connected to a sewer line? If so, please identify the sewage system, date of connection, and types of wastes discharged. If you are or at some time operated your facility(s) without a sewer line connection, please identify the method of waste water disposal that you use or did use. Specifically, have you or are you using leach field(s), septic tank(s), or any other method of on-site disposal.
7. All analyses from sampling of monitoring and supply wells, underground tanks, soil samples, and soil-gas sampling conducted at your facility. Please include any reports written by consultant(s) about these sample analyses.
8. Are you or your consultants planning to perform any investigations of the soil, water (ground or surface), geology, geohydrology, or air quality on or about the site? If so, please describe the planned investigation(s).
9. A list of all current and former employees, agents, contractors, consultants, Department officers, and other personnel who may possess knowledge or information relevant to this inquiry. This list should include each individual's name, address, telephone number, and job title or function.
10. Length of time you has been at the site location and any information you have regarding former occupants of this location and their hazardous waste practices.
11. Any new information regarding use and disposal of chlorinated solvents by any person or business in the San Fernando Valley.
12. A detailed description of all hazardous substance and hazardous waste spills, leaks, and incidents, as well as any clean-up actions undertaken during the history of your facility's operation.
13. A list of the names and addresses of all solvent suppliers and solvent recyclers from which either products or services were acquired for use by your facility.
14. An audited set of financial statements which includes a Statement of Financial Position/Balance Sheet, Income Statement, and Statement of Changes in Working Capital, and any other supplementary information for your company's most recent fiscal year.
15. What is the legal relationship between the Public Services Department and the City of Burbank? Are you a corporate entity, a subsidiary, a division, or otherwise? Also, provide the administrative organizational structure of the Public Services Department, including an explanation of its relationship to the City of Burbank and the State of California.

Please answer each question separately. Documents supplied should be labeled with the number of the question that the documents address.

Your response to this request for information must be sent to EPA within thirty (30) calendar days of your receipt of this letter and should be directed to:

Alisa Greene
U.S. Environmental Protection Agency
Region IX (T-4-1)
215 Fremont Street
San Francisco, CA 94105

EPA regulations governing confidentiality of business information are set forth in Part 2, Subpart B of Title 40 of the Code of Federal Regulations. For any portion of the information submitted which you believe is entitled to confidential treatment, a confidentiality claim may be asserted in accordance with 40 C.F.R., Section 2.203(b). If EPA determines that the information so designated meets the criteria set forth in 40 C.F.R., Section 2.203, the information will be disclosed only to the extent, and by means of the procedures specified in 40 C.F.R. Part 2, Subpart B. EPA will construe the failure to furnish a confidentiality claim with response to this letter as a waiver of that claim, and the information may then be made available to the public by EPA without further notice.

Please give this matter your immediate attention. If you have any questions concerning this letter, please contact Alisa Greene at (415) 974-9096.

Sincerely,

Original Signed By:

Jerry Clifford
Assistant Director
Hazardous Waste Management Division

cc: Marcia Preston, ORC-EPA
Dave Bacharowski, RWQCB

U.S. EPA CONCURRENCES						
SYMBOL :	H-6-1	H-6-1	ORC	H-7	H-6-1	H-8
SURNAME:	MATHCOVDIS	Greene	L. Williams	JC	JB FOR WRENS	JL
DATE :	9/6/81	9/7/89		4/1/81	10/5/89	10/5

OFFICIAL FILE COPY

P 918 447 901

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED

NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to	
Fred Lantz	
Street and No.	
164 West Magnolia AVE	
P.O., State and ZIP Code	
P.O. 631, CA 91503	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$
Postmark or Date	
3007/104(c) LETTER	

PS Form 3800, June 1985

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